

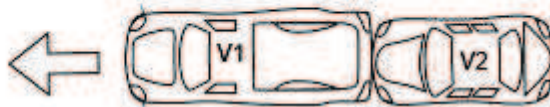
Police Use Only			Commonwealth of Massachusetts						RMV Document Number					
Date of Crash 01/19/2026		Time of Crash 0608 24HR		City/Town Auburn		Motor Vehicle Crash Police Report			Number Vehicles 2	Number Injured 0	Speed Limit 30		State Police Local Police MBTA Police Campus Police Other:	
AT INTERSECTION:				< LOCATION >		NOT AT INTERSECTION:								
<div>1</div> <div>1</div> <div>Route# Direction Name of Roadway/Street</div> <div>At</div> <div>Route# Direction Name of Intersecting Roadway/Street</div> <div>Also at Intersection with</div> <div>Route# Direction Name of Intersecting Roadway/Street</div>						<div>2</div> <div>10</div> <div>5 MILLBURY ST</div> <div>Route# Direction Address # Name of Roadway/Street</div> <div>Feet N S E W of Mile Marker Exit Number</div> <div>Feet N S E W of Route# Intersecting Roadway/Street</div> <div>Feet N S E W of Landmark</div>								
						<div>2</div> <div>11</div>								
						<div>2</div> <div>4</div>								
						<div>3</div>								
Please Select One of the Following:		<input checked="" type="checkbox"/> Vehicle 11 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		Crash Report ID# 26-28-AC						
License # S45080833 St MA DOB/Age 10/05/1984						Reg # M6290A Reg Type CO Reg State MA						<div>1</div> <div>12</div>		
Sex M Lic. Class D 19 19 Lic. Restrictions 1 20 CDL Endorsement						Veh Year 2019 Veh Make FORD Veh Config. 2 21						<div>1</div> <div>12</div>		
Operator BUZANOSKI, MARCUS RICHARD						Owner AUBURN TOWN OF						<div>4</div> <div>1</div>		
Address 1181 SCHOOL ST						Address 104 CENTRAL ST						<div>13</div>		
City WEBSTER State MA Zip 01570-3034						City AUBURN State MA Zip 01501-2310						<div>13</div>		
Insurance Company PILGRIM INSURANCE COMPANY						Vehicle Action Prior to Crash 1 22						<div>13</div>		
Vehicle Travel Direction: N S E W Responding to Emergency? 2						Event Sequence 1 23 23 23 23						<div>13</div>		
Citation # (If Issued)						Most Harmful Event 1 24						<div>13</div>		
Viol. 1: Ch/Sec/Sub Viol. 2: Ch/Sec/Sub						Driver Contributing Code 1 25 25						<div>13</div>		
Viol. 3: Ch/Sec/Sub Viol. 4: Ch/Sec/Sub						Driver Distracted by 0 26 26						<div>13</div>		
Please fill out for operator and all occupants involved						34 Seat Pos. 35 Safety System 36 Airbag Status 37 Eject Code 38 Trap Code 39 Injury Status 40 Transp. Code Medical Facility						<div>13</div>		
Operator						See Above						<div>13</div>		
												<div>13</div>		
												<div>13</div>		
												<div>13</div>		
Please Select One of the Following:		<input checked="" type="checkbox"/> Vehicle 21 #Occupants		<input type="checkbox"/> Hit/Run		<input type="checkbox"/> Moped		<input type="checkbox"/> Vulnerable User Complete the Vulnerable User section.						
License # S63612326 St MA DOB/Age 08/17/1998						Reg # 6MYV87 Reg Type PC Reg State MA						<div>14</div>		
Sex M Lic. Class D 19 19 Lic. Restrictions 1 20 CDL Endorsement						Veh Year 2010 Veh Make CHEVROLET Veh Config. 1 21						<div>14</div>		
Operator GRANVILLE, JEFFREY K						Owner GRANVILLE, JEFFREY K						<div>14</div>		
Address 52 PLANTATION ST APT 1						Address 52 PLANTATION ST APT 1						<div>14</div>		
City WORCESTER State MA Zip 01604-5058						City WORCESTER State MA Zip 01604-5058						<div>14</div>		
Insurance Company PROGRESSIVE DIRECT INSURA						Vehicle Action Prior to Crash 1 22						<div>14</div>		
Vehicle Travel Direction: N S E W Responding to Emergency? 2						Event Sequence 1 23 23 23 23						<div>14</div>		
Citation # (If Issued)						Most Harmful Event 1 24						<div>14</div>		
Viol. 1: Ch/Sec/Sub Viol. 2: Ch/Sec/Sub						Driver Contributing Code 1 25 25						<div>14</div>		
Viol. 3: Ch/Sec/Sub Viol. 4: Ch/Sec/Sub						Driver Distracted by 0 26 26						<div>14</div>		
Please fill out for operator and all occupants involved						34 Seat Pos. 35 Safety System 36 Airbag Status 37 Eject Code 38 Trap Code 39 Injury Status 40 Transp. Code Medical Facility						<div>14</div>		
Operator/Occupants						See Above						<div>14</div>		
												<div>14</div>		
												<div>14</div>		
												<div>14</div>		

→ = Direction 1 = Vehicle 1 2 = Vehicle 2 ○ = Pedestrian ○ = Bicycle

Crash Diagram:

ie: → 1 → 2 → ○ → ○

5 Millbury St. Auburn DPW



If Crash Did Not Occur on a Public Way:

- ☐ Off-Street Parking Lot
- ☐ Garage
- ☐ Mall/Shopping Center
- ☐ Other Private Way

↑ Arrow



Crash Narrative:

V1 was traveling west on Millbury St. V1 is a plow truck for the Town Of Auburn. V1 was slowing down and activated their right turn signal to make a right turn into the Auburn DPW. V2 crashed into the rear end of V1. V2 stated that due to the road conditions they did not have enough time to slow/stop. There were no reported injuries, and both vehicles left the scene under their own power.

Witnesses:

Name (Last,First,Middle)	Address	Phone #	Statement

Property Damage:

Owner (Last,First,Middle)	Address	Phone #	41-Type	Description of Damaged Property

Truck and Bus Information:

Registration # _____ (From Vehicle Section)

Carrier Name _____ Bus Use ☐ 42

Address _____ City _____ St _____ Zip _____

US DOT #: _____ State Number _____ Issuing State _____ MC/MX/ICC #: _____

Interstate ☐ 43 Cargo Body Type Code ☐ 44 GVWR/GCWR ☐ 45

Trailer Reg #: _____ Reg Type _____ Reg State _____ Reg Year _____ Trailer Length ☐ 46

Hazmat Information:

Placard ☐ 47 Material 1 digit # ☐ 48 Material Name _____ Material 4 digit # _____ Release code ☐ 49

Patrolman Jason P Brooks

Police Officer Name (Please Print)

Signature

88JB

ID/Badge #

Auburn Police Department

Department

Precinct/Barracks

01/19/2026

Date